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Request For Continued Examination (RCE) Transmittal		Application Number 09/941,180-Conf. #7067
Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		Filing Date August 27, 2001
		First Named Inventor Hideyuki Harada
		Art Unit 1734
		Examiner Name M. C. Mayes
		Attorney Docket Number M1071.1440

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 CFR 1.114		Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).	
a. <input type="checkbox"/> Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.		i. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____	
ii. <input type="checkbox"/> Other _____			
b. <input checked="" type="checkbox"/> Enclosed		i. <input checked="" type="checkbox"/> Amendment/Submission	iii. <input type="checkbox"/> Information Disclosure Statement (IDS)
		ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)	iv. <input type="checkbox"/> Other _____
2. Miscellaneous			
a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)			
b. <input type="checkbox"/> Other _____			
3. Fees			
The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.			
a. <input type="checkbox"/> The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. _____ . I have enclosed a duplicate copy of this sheet.			
i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e)			
ii. <input type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17)			
iii. <input type="checkbox"/> Other _____			
b. <input type="checkbox"/> Check in the amount of \$ _____ enclosed			
c. <input checked="" type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed)			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Signature	<i>Edward A. Meilman</i>		Date
Name (Print/Type)		December 6, 2004	
Name (Print/Type)		Registration No.	
Edward A. Meilman		24,735	

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